

FILED
Mar 17, 2008 8:00 am
Secretary of State

03-17-2008 90215 012 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P98 000 102939**
 1. Entity Name
TRANSMISSIONS OF WPB INC.

DO NOT WRITE IN THIS SPACE

40048415

2. Principal Place of Business 6533 SOUTHERN BLVD		3. Mailing Address SAME	
Suite, Apt. #, etc. W.P.B. FL 33413		Suite, Apt. #, etc. BLDG 3 #13	
City & State		City & State	
Zip 33413	Country USA	Zip	Country

DO NOT WRITE IN THIS SPACE

4. Fed Number
65-0884473

Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fees Required**

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: **MORRIS BRUCE**

Street Address (P.O. Box Number is Not Acceptable)
6533 SOUTHERN BLVD

BLDG 3 #13

City **W PALM BEACH** FL **33413**

8. The above named entity submits this statement for the purpose of checking its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ DATE _____

9. This corporation is unable to satisfy its filing requirements and elects to do so

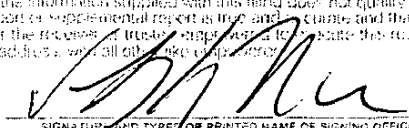
January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added In Fees**

11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PTD MORRIS BRUCE 6533 W. PALM BEACH, FL 33413	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 110.07(3)(b) Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver, trustee, assignee, or liquidator of the corporation and that my name appears in Block 11 or on an attachment with an address, and all other applicable information.

SIGNATURE:  **3/5/08**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR200346 (12/01)